

Form	This space for office use
C5	P M O A S R T K
((6/02)) <u>1/04</u>	R
ITRIBUTION ITEES	E C E I V E D

OUT OF STATE ((OR FEDERAL)) COMMITTEE CONTRIBUTION TO WASHINGTON CANDIDATES OR COMMITTEES

Name and address of ((person making)) committed Name Street address City / State / Zip	2. Check appropriate box This is the first report submitted during 20 This shows new expenditures, contributions or information changed from reports submitted previously this calendar year.				
3. ((Explain briefly the purpose or affiliation of the committee.)) Provide the purpose of the committee and the identity of any business, union, association or person with which the committee is affiliated (e.g., A ((PAC of employees of the XYZ Trade Assn., or the election committee of US Senator Jane Doe, or a PAC of members of the United Worker's Union)) State Committee of the Oregon Democratic or Republican Party, Idaho committee of United Workers Union or XYZ Trade Assn.)					
4. Officers or responsible leaders of committee: Name and address Title					
5. Candidate contributions: List each Washington of	andidate for state or lo	cal office to whom yo	u have made a contributio	n of more than \$50.00.	
Candidate's name	Office sought	Political Party	Date	Amount given	
6. Ballot measure committee contributions: List each Washington committee supporting or opposing a ballot measure to whom you have made a contribution of more than \$50.00.					
Committee name and address	Ballot Number	For or Against?	Date	Amount given	
7. Other contributions and expenditures: List each other contribution or expenditure of more than \$50.00 made to or on behalf of any Washington state or local candidate, ballot measure or political committee.					
Recipient's name and address	1	Purpose	Date	Amount given	
Check here ☐ if continued on an attached sheet					
8. Total contributions and expenditures (Add parts 5, 6, 7) .				

((CAUTION: Failure to report transactions within ten days will cause the funds to forfeit to Washington State.))

PDC Form C-5 (((6/02)) <u>12/04</u>)

CONTINUE ON REVERSE

9. Contributions received from Washington residents:	List all contributions of more than \$25.00 in the aggregate to this out of state, federal or other committee during the current calendar year from Washington residents or corporations with a place of business in Washington.			
Name and address			Date	Amount
Name and address			Date	Amount
Check here ☐ if continued on an attached sheet				
10. Eligibility to Give to State Office Candidates: Durmonths prior to making a contribution to a legislative of executive candidate, your committee must have contributions of \$10 or more from at least ten persons to vote in Washington State. A check here indicates your awareness of and pledge with this provision. Absence of a check mark m committee does not qualify to give to legislative and executive office candidates. 11. Certification: I certify the information contained in this retrue, complete and correct to the best of my knowledge.	r statewide received registered to comply eans your statewide	INSTRUCTIONS (Statutory reference: RCW 42.17.09((0 (1)(K))) <u>3</u>) WHO MUST REPORT An out-of-state political committee ((not domiciled in the state of Washington		state of Washington , a gister under Washington sing candidates or ballot ed to report under RCW ons or expenditures to or
			WHEN TO REPORT	
Signature of Committee Official Name – Typed or Printed		A C-5 report is due ((within terfollowing any month in which a is made to or on behalf of a ((receiving a contribution)) of n After filing an initial C-5 report, ((may)) shall be filed ((by lettereported. These follow-up contribution's receipt)) no later in which an additional contribut	Washington or other experiments with a contribution of the candidate of them. So from an outsubsequent reports during the canding of the many of the m	nditure of more then \$50 te or political committee of state or federal PAC)). If the same calendar year the information previously within ten days of the onth following any month
		The C-5 report, like other sta		
Title		postmark date or, if electronica		
Daytime Telephone No. ()			SEND REPORT TO	
E-Mail Address		711	ic Disclosure Commission Capitol Way, Room 206 PO Box 40908 ympia, WA 98504-0908	